

Municipality: \_\_\_\_\_

Permit #: \_\_\_\_\_

## Application For Building Permit

PROJECT INFORMATION	CLASS OF WORK	New <input type="checkbox"/>	Alterations <input type="checkbox"/>	Addition <input type="checkbox"/>	Relocation <input type="checkbox"/>
	TYPE OF BUILDING	Repair <input type="checkbox"/>	Demolition <input type="checkbox"/>	Removal <input type="checkbox"/>	
		<input type="checkbox"/> Residential	<input type="checkbox"/> Garage	<input type="checkbox"/> Commercial	
		<input type="checkbox"/> Institutional	<input type="checkbox"/> Industrial		
	Building Address	Lots		Block	Value of Project
		Plan/Quarter Section			
		Size of Building		Estimated Start Date	
		Height	# of Stories	Zoning	Occupancy Group

APPLICANT	Contact Name		Company Name (if applicable)		
	Address	City	Province	Postal Code	
	Phone Number (Incl. Area Code)	Fax Number (Incl. Area Code)		E-Mail Address	

CONTRACTOR	Contact Name		Company Name (if applicable)		
	Address	City	Province	Postal Code	
	Phone Number (Incl. Area Code)	Fax Number (Incl. Area Code)		E-Mail Address	

CONTRACTOR	Contact Name		Company Name (if applicable)		
	Address	City	Province	Postal Code	
	Phone Number (Incl. Area Code)	Fax Number (Incl. Area Code)		E-Mail Address	

PROFESSIONAL	Contact Name		Company Name (if applicable)		
	Address	City	Province	Postal Code	
	Phone Number (Incl. Area Code)	Fax Number (Incl. Area Code)		E-Mail Address	

APPLICATION INFORMATION (2 sets of drawings required)	SUBMITTED?			
	Yes	No	To Follow	
Site Plan				I hereby acknowledge that I have read this application and state that the above is correct and agree to comply with all Municipal By-Laws and/or Provincial Laws regulating building. It being expressly understood that the issuing of a permit does not relieve the applicant from complying with all By-Laws, though not called for in the specifications, or shown on plans and/or application submitted.
Floor Plans/Elevations/Cross Sections				
Mechanical/Electrical				
Ventilation Design Sheets				
Shop Drawings				
Professional Design (sealed drawings)				Applicant Signature _____ Date _____
				Application Received By _____ Date Received _____

